

No. 681**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Albert BeatonAge 92 years 2 months 17 daysPlace of death 6 Prentiss St.Date of death 3-18-68Cause of death Arteriosclerosis  
Coronary ThrombosisInterment at Rural Cemetery -Date permit issued 3/20/68Certified by Timothy P. Stone M. D.

No. 68-1

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agmt-Board of Health  
(Office issuing permit)

City or Town of Southborough - Mass.

Name of deceased Albert Beaton

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on March 21, 1968 2<sup>15</sup> PM

Certified by Lor Bertoni Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of Deceased

Susan Stevens

Age

37

years

4

months

4

days

Place of death

78 Oak Hill, Jayville

Date of death

May 7 - 1968

Cause of death

Gun shot wound of chest

Interment at

Rural Cemetery

Date permit issued

May 10, 1968

Certified by

Kenneth F. Greenleaf

M. D.

No. 68-2

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent-Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Susanne Stevens

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on May 10, 1968 - 1045 AM

Certified by Leo Bertouzzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 68-3**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of Deceased

Philip O Stevens

Age

39

years

10

months

4

days

Place of death

78 Oak Hill Rd.  
Jayville, Mass.  
5-7-68

Date of death

Cause of death

Gun shot wound of head

Interment at

Rural Cemetery

Date permit issued

5-10-68

Certified by

Kenneth P Greenleaf M. D.

No. 68-3

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Philip O Stevens

If a U. S. War Veteran, specify what war, organization, etc.  
W.W. II CoB. 62 Sig. Bn

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on May 10, 1968 - 10<sup>45</sup> A.M.

Certified by Leo Bertone, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

68-4

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of Deceased

Elsie C (Remley) Harrison

Age

81

years

months

4

days

Place of death

5 Valley Road

Date of death

May 24 - 1968

Cause of death

Natural Causes: Cerebrovascular  
accident secondary to  
hypertension + arteriosclerosis  
(Sudden death)

Interment at

Date permit issued

May 25, 1968

Certified by

S. Alden Guild

M. D.

No. 68-4

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent--Bof Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Eloise C (Remedy) Harrison

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on May 26, 1968 2 45 PM

Certified by Per Bentroy Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to J. S. Waterman Sons  
~~Donald C Morris~~Name of Deceased Bertha A (Smael) PerhamAge 65 years 18 months 18 daysPlace of death 5 Oak Hill Rd JayvilleDate of death June 10 - 1968Cause of death Natural Causes, Heart disease  
presumably coronary occlusion  
(found dead in bed)Interment at Rural CemeteryDate permit issued 6-11-68Certified by S. Alden Guied M. D.

No. 68-5

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent of Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Bertha Alice (Small) Parham

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on June 12, 1968 11 58 AM

Certified by Leo Bertinazzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 6**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Thomas F. WaltersName of Deceased Hennietta KnightAge 54 years 1 months 18 daysPlace of death 104 Sears RoadDate of death 6/19/68Cause of death Cervical MyeloidInterment at RuralDate permit issued 6/21/68Certified by Dr. T. Stone M. D.

No. ....

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Burial Agent  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Hannah Kneezel

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on June 22, 1968 2:58 PM

Certified by Lor B. ...  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Charles H LaneAge 79 years 2 months 11 daysPlace of death 184 Middle Rd SouthDate of death July 6, 1968Cause of death Natural causes. Arteriosclerosis  
heart disease, aggravated chronic  
emphysema (found dead in bed)Interment at Rural CemeteryDate permit issued July 8 1968Certified by S Alden Guied M. D.

No. 7

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Charles H. Lane

If a U. S. War Veteran, specify what war, organization, etc.  
No

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on July 8, 1968 2:50 P.M.

Certified by Leo Bontempi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Richard PC Caldwell  
Issued to ~~David C Morris~~

Name of Deceased Jessie (Kaiser) Howard

Age 73 years 6 months 8 days

Place of death 4 Stub Toe Lane

Date of death Oct 27, 1968

Cause of death Natural Causes - Heart disease  
presumably coronary thrombosisInterment at Arlington National Cemetery  
Arlington Va

Date permit issued Oct 28 - 1968

Certified by Saeden Gilda M. D.

No. 8**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)City or Town of Somerville 01772 Mass.Name of deceased Jessie (Kaiser) HowardIf a U. S. War Veteran, specify what war, organization, etc.  
.....**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at ANC Arlington, Va.  
(Name of cemetery or crematory) (City or town)on 30 Dec 68Certified by D. M. Miller, Supt  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 9**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Lanille IncName of Deceased Arthur FosterAge 60 years 9 months 28 daysPlace of death 8 Central St SouthboroDate of death December 11, 1968Cause of death Coronary ThrombosisInterment at Mt Auburn, CambridgeDate permit issued December 11, 1968Certified by Timothy P. Stone M. D.

No. 9

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent Board & Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Arthur Foster

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mount Auburn Cemetery  
(Name of cemetery or crematory) (City or town)

on Dec. 14, 1968

Certified by D.W. Munro (L)  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 1-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Eugene J. McCarthyName of Deceased Terresa PensalfineAge 83 years 11 months 4 daysPlace of death 6 Parker St - SordavilleDate of death January 4 - 1969Cause of death Cardiac decompensation  
Hypertensive H disease due to DiabetesInterment at St. Stephens CemeteryDate permit issued January 6 - 1969Certified by Thomas J. Carmichael M. D.

No. 1-69

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent of Board Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Teresa Pensalfini

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St. Steven's Cemetery  
(Name of cemetery or crematory) (City or town)

on Framingham, Mass.

Certified by \_\_\_\_\_  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 2-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased James R McElroyAge 67 years ..... months ..... daysPlace of death 136 Middle Rd. SouthboroDate of death Jan 27 - 1969Cause of death Natural - Causes Heart Disease  
Plus Coronary Sclerosis -  
(Found dead in home)Interment at Rural Cemetery SouthboroDate permit issued 1-29-69Certified by S Alden Gineed M. D.

No. ....

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Irene R. McEvoy

If a U. S. War Veteran, specify what war, organization, etc.

None

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural cemetery Southboro, Mass.  
(Name of cemetery or crematory) (City or town)

on Jan. 29, 1969 11 00 AM

Certified by P. J. Bartolucci Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 3-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased William James MerchantAge 67 years 6 months 29 daysPlace of death 269 Parkview Rd. Suisun

Date of death .....

Cause of death Carcinoma, BronchogenicInterment at Rural Cemetery, SuisunDate permit issued 2-15-69Certified by Timothy P. Stone M. D.

No. 3-69

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro, ..... Mass.

Name of deceased William F. Merchant

If a U. S. War Veteran, specify what war, organization, etc.

WWI Marine Corps

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural cemetery, Southboro, Mass.  
(Name of cemetery or crematory) (City of town)

on Feb. 15, 1969

Certified by Joe Anthony S. J.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 7-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased William F. OuthouseAge 79 years 4 months 19 daysPlace of death 224 Boston Rd. SouthonDate of death July 3 - 1969Cause of death Gibbali, Pulmonary, Multiple  
ArteriosclerosisInterment at Rural CemeteryDate permit issued July 5 - 1969Certified by Anthony P. Stone M. D.

No. ....

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
.....  
(Office issuing permit)

City or Town of Southboro ..... Mass.

Name of deceased William H. Onthank .....

If a U. S. War Veteran, specify what war, organization, etc.

None  
.....

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
.....  
(Name of cemetery or crematory) (City or town)

on July 6, 1969 - 2 45 P.M .....

Certified by Leo Bunting Supt.  
.....  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 8-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Henry J BakerAge 61 years 3 months 11 daysPlace of death 11 Katiaguma Rd  
SouthboroDate of death July 8, 1969Cause of death Heart Disease Presumably  
Coronary Sclerosis (found  
dead in bed)Interment at Rural CemeteryDate permit issued July 9 - 1969Certified by Robert P. [Signature] M. D.

No. ....

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Henry J. Baker

If a U. S. War Veteran, specify what war, organization, etc.

WW II Athletic Instructor

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.  
(Name of cemetery or crematory) (City or town)

on July, 12, 1969

Certified by Leo Bertone, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 9-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Robert NortonName of Deceased Mary Janet RingAge 60 years 7 months 13 daysPlace of death 16 Brook LaneDate of death December 28, 1969Cause of death Natural Causes - Heart Disease  
Presumably Coronary Thrombosis  
(found dead in bed)Interment at Holyhood Cemetery, BrooklineDate permit issued December 29, 1969Certified by S Alden Guild M. D.

No. 9-69

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Mary Janet Perez

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Holyhood Cemetery, Brookline  
(Name of cemetery or crematory) (City or town)

on December 31, 1969

Certified by Patrick Zelle  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 10-69**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Maria (Machade) PissieuAge 85 years 7 months 20 daysPlace of death 28 Central StreetDate of death Dec 31 - 1969Cause of death Myocardial InfarctionInterment at Lural CemeteryDate permit issued January 3 - 1970Certified by Timothy P Stone M. D.

No. ....

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agat Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Maria (Malchioni) Fessini

If a U. S. War Veteran, specify what war, organization, etc.  
None

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on January 3, 1970 10:50 AM

Certified by Leo Bertomaggi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 1-70**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Catherine G. JenniAge 75 years ..... months ..... daysPlace of death Turnpike Rd. SouthboroDate of death Jan. 19-1970Cause of death Natural Causes - Heart Disease  
presumably coronary arterio-  
sclerosis (Found dead in room)Interment at Rural CemeteryDate permit issued January 21, 1970Certified by S. Elden Guild M. D.

No. 1-70

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Catherine G. Kinn

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on January 22, 1970 945 AM

Certified by Lo Bertuzzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 2-70**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Bernice (Nichols) MaddenAge 49 years 6 months 4 daysPlace of death 10 Mitchell St SouleboroDate of death 2-20-70Cause of death Pneumonia & myocardialInterment at Influenza  
Blue Hill Cemetery  
Brantree MassDate permit issued 2-21-70Certified by T. Morris & Stone M. D.

No. ....

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Bernice (Nichols) Madden

If a U. S. War Veteran, specify what war, organization, etc.  
None

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Blue Hill Cemetery Braintree  
(Name of cemetery or crematory) (City or town)

on 2/23/70

Certified by Gerald M. Ridge  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 3-10**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to James C. MorrisName of Deceased Angela (Malchinda) RossiAge 93 years 8 months 25 daysPlace of death 11 A Cherry St South NorwalkDate of death 3-15-70Cause of death Pulmonary EmbolusArteriosclerosis Hypertension  
Interment at Rural CemeteryDate permit issued 3-17-70Certified by Timothy P. Stone M. D.

No. 30-70

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass. Mass.

Name of deceased Angela (Malchiodi) Rossi

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on March 18, 1970 - 11:45 AM

Certified by Rev. Anthony S. P.T.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 4-70**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Eleanor M (Bates) ArguissallAge 38 years 8 months 23 daysPlace of death 6 Winchester St SouthburyDate of death 5-28-1970Cause of death Natural Cause (Cerebral Hemorrhage & Sudden Death)Interment at Rural CemeteryDate permit issued 5-29-70Certified by S Alden Guild M. D.

No. 4-70

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Eleanor M. (Bates) Aspinwall

If a U. S. War Veteran, specify what war, organization, etc.

None

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on May 30, 1970 11<sup>20</sup> AM

Certified by L. B. Buttrick  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

5-70

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to ..... Home  
Harper Funeral

Name of Deceased ..... Glenn McMillan

Age ..... 56 ..... years ..... 4 ..... months ..... 15 ..... days

Place of death ..... Wood St Southboro

Date of death ..... 6/21/70

Cause of death .....

Interment at ..... North Cemetery Oxford  
Main

Date permit issued ..... June 24-1970

Certified by ..... S. Alden Guild ..... M. D.



No. ....

**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Glenn M. Willman

If a U. S. War Veteran, specify what war, organization, etc.

W.W. 11**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at North Cemetery Oxford, Mass.  
(Name of cemetery or crematory) (City or town)on 25 JUNE 1970Certified by Courtney C. Schofield  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Margaret A NearyAge 87 years 0 months 5 daysPlace of death 18 Middle Rd SouthboroDate of death 7-5-70Cause of death Bronchopneumonia 7 days  
Cerebral Thromboses 3 wks  
ArteriosclerosisInterment at Immaculate Conception  
Cemetery - March 10th ManDate permit issued 7-7-70Certified by Timothy P Stone M. D.

No. 4-70

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent-Board of Health  
(Office **issuing** permit)

City or Town of Southborough Mass.

Name of deceased Margaret Neary

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Immaculate Conception Marlboro  
(Name of cemetery or crematory) (City or town)

on July 8, 1970

Certified by Rev. Wm P. Sullivan  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 7-70**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to W.C. Goodrich128 Washington St HyannisName of Deceased Arthur C HorvAge 74 years 2 months 11 daysPlace of death 184 Southville Rd -SouthboroDate of death 7-16-70Cause of death Natural Causes - HeartDisease presumably  
Coronary OcclusionInterment at Cedar Grove CemeteryPeabody, MassDate permit issued 7-17-70Certified by S. Alden Gould M. D.

No. 7-70

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased William C Hoar

If a U. S. War Veteran, specify what war, organization, etc.  
World War II

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Cedar Grove Cemetery, Peabody  
(Name of cemetery or crematory) (City or town)

on July 20, 1970

Certified by Ronald V. Swales  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Robert K. WadsworthName of Deceased Edward Beble OffuttAge 85 years 8 months 30 daysPlace of death 77 Deerfoot Rd, SouthboroDate of death July 29 - 1970Cause of death Carcinoma  
Emphysema prostateInterment at Newton Crematory,Newton - Mass  
Date permit issued July 30 - 1970Certified by Timothy P. Stone M. D.

No. 8-70

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Edward Preble Offutt

If a U. S. War Veteran, specify what war, organization, etc.

*Cremated*

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at NEWTON CEMETERY & CREMATORY  
(Name of cemetery or crematory) (City or town)

on Aug 17 1970

Certified by \_\_\_\_\_  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 9-70**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Aram. Bedrosian Funeral HomeName of Deceased George KashgarianAge 74 years 11 months ..... daysPlace of death 153 Cordaville Rd  
Southboro, MassDate of death August 2 - 1970Cause of death Coronary Thrombosis <sup>Sudden</sup>Interment at Mt. Auburn Cemetery  
CambridgeDate permit issued August 3 - 1970Certified by Timothy P. Stone M. D.

No. 9-70**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent- Board of Health  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased George Kashgarian

If a U. S. War Veteran, specify what war, organization, etc.

W.W. I**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mt. Auburn Cemetery Camb. Mass.  
(Name of cemetery or crematory) (City or town)August 5, 1970ified by Joe Mues (PCN)  
(Signature of Superintendent, cemetery or crematory)

If no officer in charge, undertaker should sign and return this stub.

No. 10-70**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Earl Joseph MurphyAge 28 years 9 months 4 daysPlace of death Southboro MassDate of death August (?) 22-1970Cause of death Gunsight wound to the head  
with ass skull fracture  
and brain injury. HomicidalInterment at Rural Cemetery -  
Southboro, MassDate permit issued August 27-1970Certified by S. Alden Gould M. D.



No. 10-70

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent - Board B  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Earl Joseph Murphy

If a U. S. War Veteran, specify what war, organization, etc.  
Reg. Army - M. Police Corp

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on September 4, 1970 10<sup>30</sup> AM

Certified by Leo B. [Signature]  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to James O. MorrisName of Deceased Ralph L. SmithAge 77 years 11 months 15 daysPlace of death 181 Parkerville Rd -Date of death Sept 20 - 1970Cause of death Myocardial Infarction  
Coronary Thrombosis  
Arteriosclerotic Heart DiseaseInterment at Rural CemeteryDate permit issued 9/22/70Certified by Timothy P. Stone M. D.

No. 2-70**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health

(Office issuing permit)

City or Town of Southborough Mass.Name of deceased Ralph L. Smith

If a U. S. War Veteran, specify what war, organization, etc.

None**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro

(Name of cemetery or crematory)

(City or town)

on September 23, 1970 3:15 PMCertified by Dr. R. B. Smith, Supt.

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 1A-71**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C. Morris

Name of Deceased

Robert E. Kay

Age

55

years

9

months

24

days

Place of death

18 Gilmore Rd, Southboro

Date of death

Jan 25, 1971

Cause of death

Carcinoma, sigmoid colon

Interment at

Restland Mem Park  
Lagover, New Jersey

Date permit issued

January 26, 1971

Certified by

Timothy P. Stone

M. D.

No. 2171**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Cookson Funeral HomeName of Deceased Evelyn Hestie (Bernie) BraggAge <sup>80</sup>~~78~~ years 1 months 13 daysPlace of death 99 Pine Hill RoadDate of death February 23 - 1971Cause of death Arteriosclerotic Heart Disease (Aortic Stenosis)Interment at Newton CrematoryDate permit issued February 24 - 1971Certified by Timothy P. Stone M. D.



No. 2/71**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agmt - Board of Health  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Evelyn Leslie (Bernie)If a U. S. War Veteran, specify what war, organization, etc. Br 99Cremated**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

**NEWTON CEMETERY & CREMATORY**t Newton (Name of cemetery or crematory) (City or town)February 25, 1971rtified by [Signature]  
(Signature of Superintendent, cemetery or crematory)

is no officer in charge, undertaker should sign and return this stub.

No. 74-2**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Ronald C Morris

Name of Deceased

Joseph A SantonyAge 49 years 1 months 29 days

Place of death

11. Willow St. Southborough

Date of death

February 22, 1971

Cause of death

Natural Causes of Heart disease, pre-  
sumably coronary thrombosis (found  
dead in home)

Interment at

Rural Cemetery, Southboro

Date permit issued

Feb 24 1971

Certified by

S. Alden Gried

M. D.

No. -76

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Joseph A. Fantony

If a U. S. War Veteran, specify what war, organization, etc.

WWII Coast Guard

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, Mass  
(Name of cemetery or crematory) (City or town)

on Feb. 26, 1971 11:15 AM

Certified by Leo Bertonazzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 71-3**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Mary E. (McLaughlin) KileyAge 79 years 7 months 14 daysPlace of death 22 Edgewood Ed. SouthboroughDate of death Feb 28 - 1971Cause of death Pulmonary Emphysema - FibrosisInterment at Chronic Bronchitis Rural CemeteryDate permit issued 3-1-71Certified by Timothy P. Stone M. D.

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Mary E. (McLaughlin) Kiley

If a U. S. War Veteran, specify what war, organization, etc.  
None

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on March 2-1971 9:55 AM

Certified by Leo Bertinazzi Sept.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 71-4**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Ronald C MorrisName of Deceased Antonie GiombettiAge 82 years 8 months 7 daysPlace of death 261 Cordaville Rd -  
Southboro, MassDate of death March 6 - 1971Cause of death Hypertensive, Atherosclerotic  
Heart Disease① Coronary Thrombosis  
Interment at Rural CemeteryDate permit issued 3-8-71Certified by Timothy P. Stone M. D.

No. 71-4

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Antonia Lionchetti

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on March 8, 1971 11:05 AM

Certified by Leo Buttrick Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 71-5**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Allen E CoxAge 47 years 2 months 21 daysPlace of death 31. Hagg Rd SouthboroughDate of death April 22 - 1971Cause of death Subarachnoid Hemorrhage  
Atherosclerotic Heart DiseaseInterment at Rural Cemetery, SouthboroughDate permit issued 4-23-71Certified by Timothy P. Stone M. D.

No. 71-5

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Allen E. Cox

If a U. S. War Veteran, specify what war, organization, etc.

WW II 1254 Engr Combat Bn.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural cemetery Southborough, Mass.  
(Name of cemetery or crematory) (City or town)

on April 24, 1971 11:00 AM

Certified by Lee Bartoyn Sept.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 71-6**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Ronald C MorrisName of Deceased Michael J. CraneAge 28 years 1 months 10 daysPlace of death 66 Main St SouthboroDate of death April 24 - 1971Cause of death Aphyxiation by hangingInterment at St Josephs Cemetery  
Saugerties, NYDate permit issued 4-26-71Certified by Robert Littenhouse M. D.



No. ....

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agnes Beard & Heath  
(Office issuing permit)

City or Town of Southborough ..... Mass.

Name of deceased Michael J. Crane .....

If a U. S. War Veteran, specify what war, organization, etc.  
None

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at ..... St. Joseph's Cemetery, Dolgeville, N.Y. .....  
(Name of cemetery or crematory) (City or town)

on April 28, 1971 ..... (Sec.E/Lot #2/Gr.2)

Certified by R. Edward J. Sheedy .....  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 71-7**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Robert K. WadsworthName of Deceased Jean Henrietta (Graham) ShillingsAge 85 years 10 months 30 daysPlace of death 18 Oak Hill Rd SouthburyDate of death Apr 24 - 1971Cause of death Aortic Stenosis  
Arteriosclerotic Heart DiseaseInterment at Walter St. Cemetery Danvers  
MassDate permit issued 4-26-71Certified by Timothy P. Stone M. D.

No. 71-8**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Philip W BurkeAge 56 years 9 months 2 daysPlace of death 36 E Main StreetDate of death 6/18/71 SateeboraCause of death Bronchogenic Carcinoma LungInterment at Rural CemeteryDate permit issued 6-20-71Certified by Timothy P Stone M. D.

No. ....

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent - Board & Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Philip W. Burke

If a U. S. War Veteran, specify what war, organization, etc.  
None

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at rural cemetery Southborough, Mass.  
(Name of cemetery or crematory) (City or town)

on June 21, 1971 11 05 AM

Certified by L. B. Buttrick, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this

No. 71-9

**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to J. J. Waterman, Sons Inc

Name of Deceased Frederick M Butler

Age 65 years 4 months 16 days

Place of death St. Max Golf Course  
Butler

Date of death 7-21-71

Cause of death Natural causes / Heart disease  
prec coronary occlusionInterment at (made death on golf course)  
North Cemetery Wayland

Date permit issued 7-22-71

Certified by J. Alder Guind M. D.



No. 71 -**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent = Board of Health  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Frederick M. ButlerIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at North Cemetery Weyland  
(Name of cemetery or crematory) (City or town)on 7-24-71Certified by John E. Nelson  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 74-10**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Josephine M O'DonnellAge 71 years 5 months 1 daysPlace of death 160 Southville RdSouthboroughDate of death 9/1/71Cause of death Natural Cause: Heart DiseasePres. coronary Thrombosis  
(Sudden death)Interment at St Lukes Cemetery, WestboroDate permit issued 9-3-71Certified by S Aiden Givens M. D.

No. 71-10**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agmt - Board of Health  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Josephine M. O'Donnell

If a U. S. War Veteran, specify what war, organization, etc.

None**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St Lukes Cemetery, Westboro  
(Name of cemetery or crematory) (City or town)on Sept 4 1971Certified by Raquel S. Burke  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.